Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300 Candidate or Committee Pre-Election Report: Organization / Providing Materials / Notification * Organizational form provided to candidate or committee (M101, M101BQ, M101PC) Campaign finance report form provided to candidate or committee (M102) Summary of the campaign finance law provided (OCPF guide booklet) Filing notice (includes reporting dates, due dates and language concerning late fines) Pre-Preliminary Pre-Election 30-Day Year-end *All forms, guides and notices can be delivered by e-mail **Inspecting Reports** The campaign finance law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date. Correct dates for the relevant reporting period Signatures Positive ending balance If the M102-0 form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence. Contributions (Monetary receipts and in-kind contributions) Names and Addresses for contributions of more than \$50 Occupation and Employer for contributions of \$200 or more No contributions from corporations, business partnerships, LLCs or LLPs No contributions from individuals for more than \$1,000 (see OCPF's limits chart for other limits) Expenditures Vendor Names and Addresses for expenditures of more than \$50 Purpose information is disclosed Reimbursements form (R-1s) filed for reimbursements Date of Inspection _



Signed under the penalties of perjury:

E Forme CRF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

	CITY CLERKS OFFICE	1
	NOTH HAMPTON, MA 01060	
11 in Renor	rting Period dates Beei	nn ing Date

17.	1/2019
7	Lies A
	1824

File with: City or Town Clerk or Election Commission

Ending D	ate:	100	1	135/70) (
		7 1		<i>-</i> /	17
		•	-	•	

Fill in Reporting Period dates: Beginnlng Date:	Ending Date: 12/35/201
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Laura Ann Fallon Candidate Full Name (if applicable) Northampton School Committee Word? Office Sought and District A Massasoit St Northampton MA 01000 Residential Address E-mail: aura_ann_fallon@hotmail.com Phone # (optional): 732-673-3328	Committee to Elect Laura Fallon Committee Name John Hoops Name of Committee Treasurer 12 Marsasoit St Northampton MA 0,060 Committee Mailing Address E-mail: [aura-ann-fallon @ Notroi]. com Phone # (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	122.94
Line 2: Total receipts this period (page 3, line 11)	Ø
Line 3: Subtotal (line 1 plus line 2)	199.94
Line 4: Total expenditures this period (page 5, line	e 14) 20.00
Line 5: Ending Balance (line 3 minus line 4)	102.94
Line 6: Total in-kind contributions this period (pa	ge 6)
Line 7: Total (all) outstanding liabilities (page 7)	\bigcirc
Line 8: Name of bank(s) used: Horence	Bank
	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 177 9 Example 197 197 197 197 197 197 197 197 197 197
finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	, in-kind contributions and liabilities for this reporting period and represents the

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address	Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
			Annual Co
	-		
<u> </u>			
			1
· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·	<u></u>	
	<u> </u>		
	,		
ine 9: Total Recei	pts over \$50 (or listed above)		
	ipts \$50 and under* (not listed above)		
ine 11: TOTAL F	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

SCHEDULE A: RECEIPTS (continued)

	Name and Residential Address	Occupation & Employer (for contributions of \$200 or more)		
Date Received	(alphabetical listing required)	habetical listing required) Amount (for contribut		
		and the same of th		
		MICO ACTION OF		
THE PERSON OF TH				
		- Continue a continue		
		(10000000000000000000000000000000000000		
Served and Served Serve				
		di l'incade de		
	·			
`				
	re-way	CT TITLE TO THE TI		
		C. C		
		The second secon		
	ACCOUNTS OF THE PROPERTY OF TH			
			7	
ine 9: Total Recei	pts over \$50 (or listed above)		<u>l</u>	
ine 10: Total Rece	ipts \$50 and under* (not listed above)		1	
		E- 1000 -	1	
ine 11: TOTAL F	RECEIPTS IN THE PERIOD	Cr. channel	☐ Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expend	eport all expenditures. Please include your committee name and a page number on each page.)					
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
11/30	Fiorena Bank	PO BOX 60700 Florence, MA 01062	Account Inactivity Fee	d10.00		
19/30	Florence Bank	PO BOX 60700 Florence MA 0262	Account Inactivity fee	\$10.00		
	_					
	-			2		
	·		·			
	Line 12: Total Expenditures over \$50 (or listed above)					
Line 13: Total Expenditures \$50 and under* (not listed above)						
* If you have item	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

SCHEDULE B: EXPENDITURES (continued)

· · · · · · · · · · · · · · · · · · ·	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
	Commission of the control of the con	White the second		1		
				,		
- Inches		The colour broken trait with the colour and the col				
				,		
† † † † † † † † † † † † † † † † † † †						
				1		
				Per Control of the Co		
				Ī		
			Windows Court Control of the Control			
***************************************			ुच्चक कोरा राज्याचीकोल्य कोरां नामेकोरा गर्देको नामेकालकालकार नामि स्वयुक्तात्र कोरास्त्रकार किया राज्याच्या का का का का का			
	}					
n i maran a an ing marang marjidakan padi padigan na ing m						
				,		
A CONTRACTOR OF THE CONTRACTOR				1		
	/ /					
				l		
,						
Application of the control of the co		Construction of the constr	Parameter visit or Traditional Action Confirm To Lancon Confirm Confir			
· · · · · · · · · · · · · · · · · · ·		Line 12: Expenditures over \$50) (or listed above)			
		Zine 12. Exponditures over \$30	(01 113100 400 10)			
		Line 13: Expenditures \$50 and	under* (not listed above)	D. ROLLINGS		
	. .	T · 44 MOMENT PROPERTY	TIBECTAL MITTER BUILDAN	- Control of the Cont		
		Line 14: TOTAL EXPENDIT	URES IN THE PERIOD hould include only those expenditure			

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
WHITE SECTION				
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
	•	Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS			

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Pate Incurred	To Whom Due	Address	Purpose	Amount
				1
		,		
		,		
Top Cale Black Black		The state of the s		
				1

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

Page 7